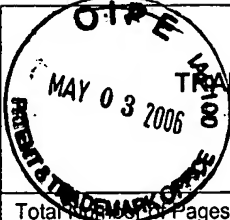


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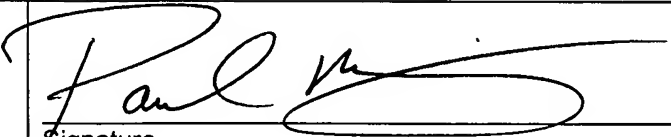
	Application Number	10/607,688	
	Filing Date	June 27, 2003	
	First Named Inventor	Masahiro Otsuka	
	Art Unit	3732	
	Examiner Name	Todd E. Manahan	
Total Number of Pages in This Submission	55	Attorney Docket Number	204126-0085-01

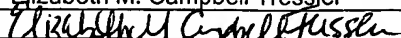
ENCLOSURES (check all that apply) <input checked="" type="checkbox"/> Amendment - 8 pages <input checked="" type="checkbox"/> Before Final <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input checked="" type="checkbox"/> Information Disclosure Statement - 1 page <input checked="" type="checkbox"/> Forms PTO/SB/08a & 08b - 2 pages <input checked="" type="checkbox"/> Cited References - 41 pages <input type="checkbox"/> Certified Copy of Priority Document <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Submission of Formal Drawings <input checked="" type="checkbox"/> Other: Duplicate copy of IDS Transmittal - 1 page	PETITION FOR EXTENSION OF TIME This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. <input checked="" type="checkbox"/> Applicant(s) claims small entity status under 37 CFR 1.27. <input checked="" type="checkbox"/> Applicant(s) petitions for a one-month extension of time and pay the fee of \$60.00 (37 CFR 1.17(a)(1)-(5)). <input type="checkbox"/> Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.
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CLAIMS FEES								
<input checked="" type="checkbox"/> No additional claim fee is required.								
					Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate	Addit. Claim Fee
Total	6	-	20	=	x 25=	\$0	x 50=	\$
Independent	1	-	3	=	x 100=	\$0	x 200=	\$
<input type="checkbox"/> First Presentation of Multiple Claim					+ 180=	\$0	+ 360=	\$

FEES	
<input type="checkbox"/> Additional Claim Fee	\$0.00
<input checked="" type="checkbox"/> Extension fee for one-month	\$60.00
<input checked="" type="checkbox"/> Information Disclosure Statement	\$180.00
<input type="checkbox"/> Surcharge for Missing Parts - Declaration	\$0.00
<input type="checkbox"/> Terminal Disclaimer	\$0.00
TOTAL FEES	\$240.00

PAYMENT OF FEES
<input type="checkbox"/> A check in the amount of \$0.00 is enclosed.
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965. A duplicate copy of this transmittal is attached for this purpose.
<input checked="" type="checkbox"/> The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$240.00.

SIGNATURE OF ATTORNEY
Paul M. McGinley, Reg. No. 55,443 MICHAEL BEST & FRIEDRICH LLP Two Prudential Plaza 180 North Stetson Avenue Suite 2000 Chicago, IL 60601-6710 Telephone: (312) 222-0800 Facsimile: (312) 222-0818
 Signature Date: 5/1/06

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is:	
<input type="checkbox"/> being facsimile transmitted to the USPTO, facsimile number (571) 273-8300;	
<input checked="" type="checkbox"/> deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below	
Typed or printed name	Elizabeth M. Campbell Tressler
Signature	
Date:	5-1-06